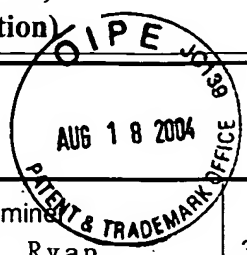


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Associate Power Of Attorney Or Agent (37 CFR 1.34) (For Representation Related To A Patent Application)			Docket No. 86052-6
In Re Application Of: Mario D. AMICO et al.			
Serial No. 10/024,266	Filing Date December 21, 2001	Examiner Zeender, F. Ryan	Group Art Unit 3627
Invention: SYSTEM AND METHOD TO FACILITATE THE PROCUREMENT OF INFORMATION FROM A USER			



TO THE COMMISSIONER FOR PATENTS:

Please recognize the following as ☐ Associate Attorney ☒ Associate Agent in this application.

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Signature of Principal Attorney or Agent of Record

Dated: August 17, 2004


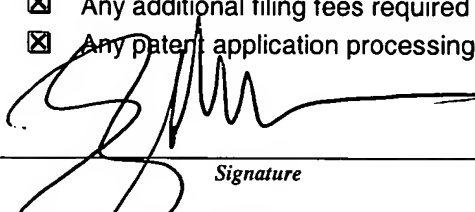
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I certify that this document is being deposited on _____ with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Signature of Person Mailing Correspondence

Typed or Printed Name of Person Mailing Correspondence

AMENDMENT TRANSMITTAL LETTER (Small Entity)				Docket No. 86052-6	
Applicant(s): Mario D'AMICO et al.					
Application No. 10/024,266	Filing Date December 21, 2001	Examiner Zeender F. Ryan	Customer No. 28291	Group Art Unit 3627	Confirmation No. 4982
Invention: SYSTEM AND METHOD TO FACILITATE THE PROCUREMENT OF INFORMATION FROM A USER					
COMMISSIONER FOR PATENTS:					
Transmitted herewith is an amendment in the above-identified application.					
<div style="display: flex; justify-content: space-between; align-items: center;"> <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27 <div style="text-align: center;"> RECEIVED AUG 25 2004 </div> <div style="text-align: right;">  </div> </div>					
The fee has been calculated and is transmitted as shown below.					
GROUP 3600					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	46 -	46 =	0 x	\$9.00	\$0.00
INDEP. CLAIMS	3 -	3 =	0 x	\$43.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 19-2550 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.					
 Signature			Dated: August 17, 2004		
Sanro Zlobec, Reg. No. 52,535 SMART & BIGGAR 1000 de la Gauchetière Street West Suite 3300 Montreal, Quebec, H3B 4W5 CANADA			<div style="border: 1px solid black; padding: 5px;"> I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. </div> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> Signature of Person Mailing Correspondence </div> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> Typed or Printed Name of Person Mailing Correspondence </div>		
CC:					